

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Eric Mark Chelgren

Inventor/Applicant: Serial Number: 10/664,242 Filing Date: 09/17/2003

Rear Suspension For Wheelchair Luby, Matthew D. For:

Examiner Name:

Art Unit: 3611

Mail Stop Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT A

Responsive to the office action dated 11/22/2004, applicant amends claims 1 and 6, and adds claims 21-26 as shown on the pages starting on page 2 hereof.



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ALLAN L. HARMS - Reg. Patent Attorney
CORY R. SPETH

February 17, 2005 TRANSMITTAL

In re application of:

Chelgren, Eric Mark

Serial no.:

10/664,242

Filed:

09/17/2003

For:

Rear Suspension For Wheelchair

Examiner Name:

Luby, Matthew D.

Art Unit:

3611

Mail Stop Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Enclosed are:

Fee Transmittal;

Amendment A;

Check # 8074 in sum of \$200.00;

Return postcard.

Allan L. Harms, Registration No. 27,558

Customer No. 23,882

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Fee Amendment, Commissioner of Patents, Alexandria, VA 22313-1450, on February 17,2005

Allan L. Harms, Reg. No. 27,558

Customer No. 23,882 Attorney for Applicant

PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.			40)	Complete if Known			
Fees pureuant to the Geneal dated Appropriations Act, 2005 (H.R. 4818).			Anntica	Application Number 10.		0/664,242	
FEE TRANSMITTAL For FY 2005			Filing D	ate	09/17/2003		
			First Na	First Named Inventor Ch		Chelgren, Eric Mark	
Applicant claims small entity status. See 37 CFR 1.27			Examin	Examiner Name Lu		uby, Matthew D.	
			Art Unit	Art Unit 3611			
TOTAL AMOUNT OF PAYMENT (\$) 200.00		Attorne	Attorney Docket No.				
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
Deposit Account Deposit Account Number: 080725 Deposit Account Name: ALLAN L. HARMS							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s)							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
FILING FEES SEARCH FEES EXAMINATION FEES							
Application Type	Fee (\$)	mall Entity Fee (\$) Fe	<u>Small I</u> e (\$) Fee		Small Entity (\$) Fee (\$)	Fees Paid (\$)	
Utility	300		00 250				
Design	200	100 1	00 50	130	0 65		
Plant	200	100 3	00 150	160	0 80		
Reissue	300	150 5	00 250	600	300		
Provisional	200	100	0 0	(0		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Small Entity Fee (\$) Fee (\$) 25							
Each independent claim over 3 (including Reissues)					200	25 100	
Multiple dependent claims					360	180	
Total Claims						ependent Claims	
HP = highest number of total	claims paid for	x = ;	0		Fee (\$)	Fee Paid (\$)	
Indep. Claims	Extra Claim		Fee Paid (\$)				
5 - 3 or HP = 2 x 100.00 = 200.00 HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x							
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)							
Other (e.g., late filing surcharge):							
SUBMITTED BY							
Signature Registration No. oz con Telephone and con a						ле 319-363-8905	
ame (Prot/Type) Allan I. Harms Customer 3'n 23 882					Date 02		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U S C 122 and 37 CFR 1.14. This collection is contracted to take 30 minutes to complete, including gathering, proparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1459, Alexandra, VA 22315-1450. BO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.